(SAMPLE LETTER OF TRANSMITTAL) 90

DATE

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

000007768560---0 -09/16/02--01053--008 *****78,75 *****78,75

Re: CHAmpion TRAINING SYSTEMS, Inc. (Name of Corporation)		
(Name of Corporation)	02	
Gentlemen:	SEP	
- 100 mm -	30	
Enclosed please find the original and one copy of the Articles of Incorporation, together check in the amount of \$122.50.	r wellh	n ny
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TPL: The second of the second		

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Filing Fee \$3500 Registered Agent 3500 Registered Designation Certified copy \$875	GAVIETT MC GOWAS
Certified copy \$ 875 TOTAL \$7875	CHAMPION TRAIN ING SYS-
(OTAL	MAILING ADDRESS OF CORPORATION
	3389 SheriDAN ST. #15

3389 ShEriDANS	FT. #154
HOllywood, FL.	33021
PHONE - (954) 649 - 7879 Area Code Number	Ext.



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

September 17, 2002

GARRETT MCGOWAN 3389 SHERIDAN STREET #154 HOLLYWOOD, FL 33021

SUBJECT: CHAMPION TRAINING SYSTEMS

Ref. Number: W02000026989

We have received your document for CHAMPION TRAINING SYSTEMS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist New Filing Section

Letter Number: 602A00052949

ARTICLES OF INCORPORATION

of

CHAMPION TRAINING SYSTEMS THE (name of corporation)

ARTICLE I - CORPORATE NAME

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

The name of the corporation is:	38 38
CHAMPION TRAINING SYSTER	
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law.	LED 30 PM 1: 38
ARTICLE III - PURPOSE	
The corporation is organized for the purpose of engaging in any activities or business permitted united States and the State of Florida.	under the laws of the
ARTICLE IV - CAPITAL STOCK	
The corporation is authorized to issue SOO shares of common stock, par value \$ 120	20 per share.
ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is:	
STREET ADDRESS	
3389 SHERIDAN STREET SUITE ISO	Z
CITY HOLLYWOOD FLORIDA 7	CIP 33021
Mailing address, if different	33001
STREET ADDRESS	
CITY FLORIDA Z	AP
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT	
The street address of the initial registered office and the name of the initial registered age	ent at the office in
NAME GARRETT MCGOWAN	in at the office is:
ADDRESS 2200 City	
CITY HALLING	m 22 a 24
FLORIDA Z	P 53021

ARTICLE VII - 1	NITIAL BOARD OF DIRECTORS	
This corporation shall have	(ONE) directors initially. Th	e number of directors may be
either increased or diminished from time to time by the	e By-Laws, but shall never be less that	n one (1). The names and
addresses of the initial director(s) of the corporation ar	e as ioliows:	
NAME GARRETT M	e GOWAN	
ADDRESS 3389 SHER 10	AN ST. #15	7
CITY HOLLY WOOD	STATE FL	ZIP 33021
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
ARTICLI	E VIII - INCORPORATORS	
The names and addresses of the incorporators signing		ollows:
0010001100		15-(1
1938 / 911001		57
CITY HOLLY WOOD	STATE C	ZIP 33021
NAME		
ADDRESS	-	· - · ·
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed th	ese Articles of Incorporation this _	12th
day of SEPTEM BER	<u></u>	
·	1	1
	DMY.	(Signature)
		(Signature)
		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

(name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at 3389 SHERIDAN ST. #154
Holly WOOD, FLORIDA, 33021
has named GARRETT MCGOWAN
located at the aforesaid address, as its registered agent to accept service of process within this
state.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature) SEPT-12.2002